FORM PFS PERSONAL FINANCIAL STATEMENT **COVER SHEET** PAGE 1 PAGE# Filed in accordance with chapter 572 of the Government Code. 21 For filings required in 2019, covering calendar year ending December 31, 2018. ACCOUNT # Use FORM PFS--INSTRUCTION GUIDE when completing this form. 00051797 1 NAME TITLE; FIRST; MI OFFICE USE ONLY The Honorable Ryan A. **ELECTRONICALLY FILED** NICKNAME; LAST; SUFFIX 04/30/2019 Guillen ADDRESS / PO BOX; 2 ADDRESS APT / SUITE #; CITY; STATE; ZIP Receipt # HD / PM Amount Date Processed X (CHECK IF FILER'S HOME ADDRESS) **TELEPHONE** AREA CODE PHONE NUMBER; EXTENSION Date Imaged NUMBER REASON FOR FILIING STATEMENT CANDIDATE _____ (INDICATE OFFICE) ELECTED OFFICER State Representative (INDICATE OFFICE) APPOINTED OFFICER ______ (INDICATE AGENCY) EXECUTIVE HEAD _____ (INDICATE AGENCY) FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT STATE PARTY CHAIR ______ (INDICATE PARTY) OTHER _____ (INDICATE POSITION) **5** Family members whose financial activity you are reporting (see instructions). Mrs. Dalinda Guillen SPOUSE **DEPENDENT CHILD** In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

SOURCES OF OCCUPATIONAL INCOME PART 1A If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD ___ 2 EMPLOYMENT NAME AND ADDRESS OF EMPLOYER / POSITION HELD X EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER** Texas House of Representatives ADDRESS / PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE 1100 North Congress State Capitol Austin, TX 78701 **POSITION HELD** State Representative NATURE OF OCCUPATION SELF-EMPLOYED INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD _ **EMPLOYMENT** NAME AND ADDRESS OF EMPLOYER / POSITION HELD EMPLOYED BY ANOTHER X (Check if Filer's Home Address) **EMPLOYER** SFLF ZIP CODE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; POSITION HELD NATURE OF OCCUPATION X SELF-EMPLOYED Residential & Commercial Leasing & Sales - Owner INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD __ **EMPLOYMENT** NAME AND ADDRESS OF EMPLOYER / POSITION HELD EMPLOYED BY ANOTHER X (Check if Filer's Home Address) **EMPLOYER SELF** ZIP CODE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; POSITION HELD NATURE OF OCCUPATION X SELF-EMPLOYED

Business Consultant & Strategic Planner

SOURCES OF OCCUPATIONAL INCOME PART 1A If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD ___ 2 EMPLOYMENT NAME AND ADDRESS OF EMPLOYER / POSITION HELD EMPLOYED BY ANOTHER X (Check if Filer's Home Address) **EMPLOYER SELF** ADDRESS / PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE **POSITION HELD** NATURE OF OCCUPATION X SELF-EMPLOYED Land Manager & Rancher INFORMATION RELATES TO ☐ FILER X SPOUSE DEPENDENT CHILD _ **EMPLOYMENT** NAME AND ADDRESS OF EMPLOYER / POSITION HELD X EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER** Rio Grande City Economic Development Corporation ADDRESS / PO BOX; APT / SUITE #; ZIP CODE CITY; STATE: 5332 E. US HWY 83 Rio Grande City, TX 78582 POSITION HELD **Executive Director** NATURE OF OCCUPATION SELF-EMPLOYED INFORMATION RELATES TO FILER X SPOUSE DEPENDENT CHILD __ **EMPLOYMENT** NAME AND ADDRESS OF EMPLOYER / POSITION HELD EMPLOYED BY ANOTHER X (Check if Filer's Home Address) **EMPLOYER SELF** ZIP CODE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; POSITION HELD NATURE OF OCCUPATION X SELF-EMPLOYED **Public Relations Consultant**

BONDS, NOTES & OTHER COMMERCIAL PAPER

PART 3

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List all bonds, notes, and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under

which the child is listed on the Co	over Sheet.		
1 DESCRIPTION OF INSTRUMENT	Alternative Investment	s (Company investmen	nt loan managed by Franklin Square)
2 HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
3 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE
DESCRIPTION OF INSTRUMENT	Chase Checking		
HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE
DESCRIPTION OF INSTRUMENT	Chase Savings		
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE
DESCRIPTION OF INSTRUMENT	Compass Bank (Certif	icate of Deposit)	
1	Compass Bank (Certif	icate of Deposit)	DEPENDENT CHILD
INSTRUMENT HELD OR		SPOUSE	DEPENDENT CHILD
HELD OR ACQUIRED BY IF SOLD NET GAIN	X FILER	SPOUSE \$5,000 - \$9,999	
INSTRUMENT HELD OR ACQUIRED BY IF SOLD NET GAIN NET LOSS DESCRIPTION OF	X FILER LESS THAN \$5,000	SPOUSE \$5,000 - \$9,999	
INSTRUMENT HELD OR ACQUIRED BY IF SOLD NET GAIN NET LOSS DESCRIPTION OF INSTRUMENT HELD OR	X FILER LESS THAN \$5,000 Texas Tuition Promise	\$5,000 - \$9,999 Fund SPOUSE	\$10,000 - \$24,999 \$25,000OR MORE
INSTRUMENT HELD OR ACQUIRED BY IF SOLD NET GAIN NET LOSS DESCRIPTION OF INSTRUMENT HELD OR ACQUIRED BY IF SOLD NET GAIN	X FILER LESS THAN \$5,000 Texas Tuition Promise	SPOUSE \$5,000 - \$9,999 Fund SPOUSE \$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE X DEPENDENT CHILD 1
HELD OR ACQUIRED BY IF SOLD NET GAIN NET LOSS DESCRIPTION OF INSTRUMENT HELD OR ACQUIRED BY IF SOLD NET GAIN NET LOSS DESCRIPTION OF	X FILER LESS THAN \$5,000 Texas Tuition Promise FILER LESS THAN \$5,000	SPOUSE \$5,000 - \$9,999 Fund SPOUSE \$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE X DEPENDENT CHILD 1
HELD OR ACQUIRED BY IF SOLD NET GAIN NET LOSS DESCRIPTION OF INSTRUMENT HELD OR ACQUIRED BY IF SOLD NET GAIN NET LOSS DESCRIPTION OF INSTRUMENT HELD OR ACQUIRED BY HELD OR ACQUIRED BY	X FILER LESS THAN \$5,000 Texas Tuition Promise FILER LESS THAN \$5,000 Texas Tuition Promise	SPOUSE \$5,000 - \$9,999 Fund SPOUSE \$5,000 - \$9,999	
HELD OR ACQUIRED BY IF SOLD NET GAIN NET LOSS DESCRIPTION OF INSTRUMENT HELD OR ACQUIRED BY IF SOLD NET GAIN NET LOSS DESCRIPTION OF INSTRUMENT HELD OR	X FILER LESS THAN \$5,000 Texas Tuition Promise FILER LESS THAN \$5,000 Texas Tuition Promise	SPOUSE \$5,000 - \$9,999 Fund SPOUSE \$5,000 - \$9,999 Fund SPOUSE	

MUTUAL FUNDS PART 4

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

Asset One (Managed Account) 2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY 3 NUMBER OF SHARES OF MUTUAL FUND 1 LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 1 5,000 to 9,999 X 10,000 OR MORE					
HELD OR ACQUIRED BY X FILER	1 MUTUAL FUND	Asset One (Managed A		NAME	
MUTUAL FUND	2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY			DEPENDENT CHILE)
NATURE OF SHARES OF MUTUAL FUND STAND S	1	_		500 TO 999	1,000 TO 4,999
AXA Equitable (Index Annuity, invested in different indexes) SHARES OF MUTUAL FUND	ı = ı	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
NUMBER OF SHARES OF	MUTUAL FUND	AXA Equitable (Index			
LESS THAN 100		X FILER	SPOUSE	DEPENDENT CHILE)
NET LOSS		_		500 TO 999	X 1,000 TO 4,999
AXA (Variable Annuity) SHARES OF MUTUAL FUND HELD OR ACQUIRED BY		LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE
NUMBER OF SHARES OF MUTUAL FUND LESS THAN 100					
MUTUAL FUND LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 IF SOLD NET GAIN NET LOSS LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000-OR MORE MUTUAL FUND NAME Fidelity Cash Reserves SHARES OF MUTUAL FUND HELD OR ACQUIRED BY FILER X SPOUSE DEPENDENT CHILD		AXA (Variable Annuity		NAME	
LESS THAN \$5,000	MUTUAL FUND SHARES OF MUTUAL FUND))
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY FILER X SPOUSE DEPENDENT CHILD	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER LESS THAN 100	SPOUSE 100 TO 499	DEPENDENT CHILE	_
NUMBER OF SHARES OF MUTUAL FUND LESS THAN 100	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN	X FILER LESS THAN 100 5,000 to 9,999	SPOUSE 100 TO 499 X 10,000 OR MORE	DEPENDENT CHILE	1,000 TO 4,999
MUTUAL FUND	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS	X FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000	SPOUSE 100 TO 499 X 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILE 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND	X FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 Fidelity Cash Reserve	SPOUSE 100 TO 499 X 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILE 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
	MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF MUTUAL FUND IF SOLD NET GAIN NET LOSS MUTUAL FUND SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER LESS THAN 100 5,000 to 9,999 LESS THAN \$5,000 Fidelity Cash Reserve FILER LESS THAN 100	SPOUSE 100 TO 499 X 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILE 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILE	1,000 TO 4,999 \$25,000OR MORE

MUTUAL FUNDS PART 4 If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. MUTUAL FUND NAME **Prudential Index Annuity** SHARES OF MUTUAL FUND HELD OR ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD NUMBER OF SHARES OF LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 **MUTUAL FUND** 5,000 to 9,999 X 10,000 OR MORE 4 IF SOLD NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE NET LOSS

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 SOURCE OF INCOME	NAME AND ADDRESS
	Company Book (Contificate of Donasia)
<u> </u>	Compass Bank (Certificate of Deposit)
Publicly held corporation	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	DO Poy 4707
	PO Box 4797
	McAllen, TX 78502
2 RECEIVED BY	
L KEGEIVED BI	X FILER SPOUSE DEPENDENT CHILD
	Miles Silver Sil
3 AMOUNT	
3 AIVIOUNT	X \$500 - \$4,999
	\$45,000 \$4,000 \$25,000 \$10,000
SOURCE OF INCOME	NAME AND ADDRESS
SOURCE OF INCOME	IVAIVIE AND ADDRESS
	Commercial Lease
Publicly held corporation	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
Publicly field corporation	
	101 S Avasolo St
	Rio Grande City, TX 78582
RECEIVED BY	
	X FILER SPOUSE DEPENDENT CHILD
AMOUNT	
	\$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 X \$25,000OR MORE
SOURCE OF INCOME	NAME AND ADDRESS
SOURCE OF INCOME	
_	Residential Lease
SOURCE OF INCOME Publicly held corporation	
_	Residential Lease
_	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
_	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
_	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr
Publicly held corporation	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
_	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582
Publicly held corporation	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr
Publicly held corporation	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582
Publicly held corporation	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD
Publicly held corporation RECEIVED BY	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582
Publicly held corporation RECEIVED BY	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD
Publicly held corporation RECEIVED BY	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD
Publicly held corporation RECEIVED BY	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD
Publicly held corporation RECEIVED BY AMOUNT	Residential Lease
Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	Residential Lease
Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	Residential Lease
Publicly held corporation RECEIVED BY AMOUNT	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS Residential Lease
Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1915 Woodsman Dr
Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME Publicly held corporation	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1915 Woodsman Dr
Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000-OR MORE NAME AND ADDRESS Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1915 Woodsman Dr College Station, TX 78582
Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME Publicly held corporation	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1915 Woodsman Dr
Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME Publicly held corporation RECEIVED BY	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000-OR MORE NAME AND ADDRESS Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1915 Woodsman Dr College Station, TX 78582
Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME Publicly held corporation	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD S500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1915 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD
Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME Publicly held corporation RECEIVED BY	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD \$500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000-OR MORE NAME AND ADDRESS Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1915 Woodsman Dr College Station, TX 78582
Publicly held corporation RECEIVED BY AMOUNT SOURCE OF INCOME Publicly held corporation RECEIVED BY	Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1913 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD S500 - \$4,999 \$5,000 - \$9,999 X \$10,000 - \$24,999 \$25,000OR MORE NAME AND ADDRESS Residential Lease ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1915 Woodsman Dr College Station, TX 78582 X FILER SPOUSE DEPENDENT CHILD

PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Chase Visa			
2 LIABILITY OF	X FILER	X SPOUSE	DEPENDENT CHILI	D
3 GUARANTOR	NONE			
4 AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	X \$10,000 - \$24,999	\$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Discover Card Servio	ces		
LIABILITY OF	X FILER	X SPOUSE	DEPENDENT CHILI	D
GUARANTOR	NONE			
AMOUNT	X \$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Capitol Credit Union			
LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILI	D
GUARANTOR	NONE			
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Sallie Mae/Navient (\$	Student Loan)		
LIABILITY OF	FILER	X SPOUSE	DEPENDENT CHILI	D
GUARANTOR	NONE			
ANACHINIT			_	
AMOUNT	X \$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE

PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

	When reporting information about which the child is listed on the Co	t a dependent child's activit over Sheet.	.y, indicate the child about v	whom you are reporting by p	providing the number under
1	PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Huntington National	Bank		
2	LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHIL	D
3	GUARANTOR	NONE			
4	AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

1 HELD	OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILE	o
□ NC	ET ADDRESS OT AVAILABLE HECK IF FILER'S DME ADDRESS	S 101 South Avasolo S Rio Grande City, TX	it	DING CITY, COUNTY, AND	STATE
X LC	RIPTION ots cres	NUMBEI 1.00000 lots Starr	R OF LOTS OR ACRES AN	D NAME OF COUNTY WHI	ERE LOCATED
RETA X NO (SI	ES OF PERSONS NINING AN INTEREST OT APPLICABLE EVERED MINERAL TEREST)				
5 IF SO	NET GAIN NET LOSS	LESS THAN \$5,00	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
HELD	OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILE	D
□ NC X CH	ET ADDRESS DT AVAILABLE HECK IF FILER'S DME ADDRESS	S	TREET ADDRESS, INCLUI	DING CITY, COUNTY, AND	STATE
DESC	OT AVAILABLE HECK IF FILER'S OME ADDRESS RIPTION			DING CITY, COUNTY, AND	
DESC AC NAME RETA X NC (SI	DT AVAILABLE HECK IF FILER'S DME ADDRESS RIPTION DTS CRES ES OF PERSONS AINING AN INTEREST DT APPLICABLE EVERED MINERAL TEREST)	NUMBEI 1.00000 lots			
DESC AC NAME RETA X NC (SI	DT AVAILABLE HECK IF FILER'S DME ADDRESS RIPTION DTS CRES ES OF PERSONS AINING AN INTEREST DT APPLICABLE EVERED MINERAL TEREST)	NUMBEI 1.00000 lots	R OF LOTS OR ACRES AN		

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

1 HELD OR ACQUIRED BY	X FILER SPOUSE DEPENDENT CHILD
2 STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 1913 Woodsman Dr College Station, TX 77840
3 DESCRIPTION X LOTS ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots Brazos
4 NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL INTEREST)	
5 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE
HELD OR ACQUIRED BY	
TILLE ON NOQUINES 51	X FILER SPOUSE DEPENDENT CHILD
STREET ADDRESS X NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	X FILER SPOUSE DEPENDENT CHILD STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE
STREET ADDRESS X NOT AVAILABLE CHECK IF FILER'S	
STREET ADDRESS X NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION X LOTS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 2.00000 lots
STREET ADDRESS X NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION X LOTS ACRES NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 2.00000 lots

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

1 HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
2 STREET ADDRESS X NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS		STREET ADDRESS, INCLU	DING CITY, COUNTY, AND STAT	ΓE
3 DESCRIPTION LOTS X ACRES	NUM 0.12200 acres Starr	BER OF LOTS OR ACRES AN	ND NAME OF COUNTY WHERE L	LOCATED
4 NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL INTEREST)				
5 IF SOLD NET GAIN NET LOSS	LESS THAN \$5	,000 \$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
HELD OR ACQUIRED BY STREET ADDRESS X NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	X FILER		DEPENDENT CHILD	TE
STREET ADDRESS X NOT AVAILABLE CHECK IF FILER'S		STREET ADDRESS, INCLU		
STREET ADDRESS X NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION LOTS	NUM 70.00000 acres	STREET ADDRESS, INCLU	DING CITY, COUNTY, AND STAT	

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

HELD OR ACQUIRED BY					
NOT AVAILABLE College Station , TX 77840	1 HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILE	D
I.00000 lots Brazos	☐ NOT AVAILABLE ☐ CHECK IF FILER'S	1915 Woodsman Dr		DING CITY, COUNTY, AND	STATE
RETAINING AN INTEREST NOT APPLICABLE SEVERED MINERAL	X LOTS	1.00000 lots	R OF LOTS OR ACRES AN	ID NAME OF COUNTY WHI	ERE LOCATED
HELD OR ACQUIRED BY X FILER X SPOUSE DEPENDENT CHILD	RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL				
STREET ADDRESS STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 1106 W Water St CHECK IF FILER'S HOME ADDRESS RIO Grande City, TX 78582 DESCRIPTION LOTS ACRES Starr NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST) NET GAIN NET	HINET GAIN	LESS THAN \$5,00	0 \$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
NOT AVAILABLE CHECK IF FILER'S RIO Grande City, TX 78582					
□ LOTS □ X ACRES X ACRES Starr NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL INTEREST) SEVERED MINERAL INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST) SEVERED MINERAL INTEREST SEVERED MIN	HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILE)
RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL INTEREST) IF SOLD NET GAIN D LESS THAN \$5,000 D \$5,000 - \$9,999 D \$10,000 - \$24,999 D \$25,000-OR MORE	STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S	S 1106 W Water St	TREET ADDRESS, INCLU		
LESS THAN \$5,000	STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION LOTS	Rio Grande City, TX NUMBEI 0.23100 acres	TREET ADDRESS, INCLU	DING CITY, COUNTY, AND	STATE
	STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION LOTS X ACRES NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL	Rio Grande City, TX NUMBEI 0.23100 acres	TREET ADDRESS, INCLU	DING CITY, COUNTY, AND	STATE

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

1 HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
2 STREET ADDRESS X NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS		STREET ADDRESS, INCLU	DING CITY, COUNTY, AND STATE	
3 DESCRIPTION X LOTS ACRES	NUM 0.27700 lots Starr	BER OF LOTS OR ACRES AN	ID NAME OF COUNTY WHERE LOCATED	
4 NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL INTEREST)				
5 IF SOLD NET GAIN NET LOSS	LESS THAN \$5	,000 \$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000-	OR MORE
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
HELD OR ACQUIRED BY STREET ADDRESS X NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	X FILER		DEPENDENT CHILD DING CITY, COUNTY, AND STATE	
STREET ADDRESS X NOT AVAILABLE CHECK IF FILER'S		STREET ADDRESS, INCLU		
STREET ADDRESS X NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION X LOTS	NUM 4.00000 lots	STREET ADDRESS, INCLU	DING CITY, COUNTY, AND STATE	

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information ab which the child is listed on the	out a dependent child's act Cover Sheet.	ivity, indicate the child about	whom you are reporting by providing the number under
1 HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
2 STREET ADDRESS X NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS		STREET ADDRESS, INCL	UDING CITY, COUNTY, AND STATE
3 DESCRIPTION		BER OF LOTS OR ACRES A	AND NAME OF COUNTY WHERE LOCATED
LOTS X ACRES	11.13000 acres Starr		
4 NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL INTEREST)			
5 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,	000 \$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE

INTEREST IN BUSINESS ENTITIES

PART 7B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

on reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under

which the child is listed on the Co				
1 HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
2 DESCRIPTION	Guillen Ranch		ND ADDRESS Filer's Home Address)	
3 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
DESCRIPTION	Cinco Properties Rio Grande City, TX 7	X (Check if F	ND ADDRESS Filer's Home Address)	
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
HELD OR ACQUIRED BY DESCRIPTION	X FILER Guillen Management	NAME A	DEPENDENT CHILD ND ADDRESS Filer's Home Address)	
	Guillen Management	NAME A	ND ADDRESS	
DESCRIPTION IF SOLD NET GAIN	Guillen Management	NAME AI	ND ADDRESS Filer's Home Address)	\$25,000OR MORE
DESCRIPTION IF SOLD NET GAIN NET LOSS	Guillen Management LESS THAN \$5,000	NAME AI X (Check if I \$5,000 - \$9,999 SPOUSE NAME AI	ND ADDRESS Filer's Home Address) \$10,000 - \$24,999	\$25,000OR MORE

INTEREST IN BUSINESS ENTITIES PART 7B If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. HELD OR ACQUIRED BY X SPOUSE ☐ FILER DEPENDENT CHILD 2 DESCRIPTION NAME AND ADDRESS X (Check if Filer's Home Address) JLeon Public Relations 3 IF SOLD NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE NET LOSS

BOARDS AND EXECUTIVE POSITIONS

PART 12

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE.

l	the child is listed on the Cover S	neet.				
1	ORGANIZATION	GANIZATION Lower Rio Grande Valley Workforce Development Board				
2	POSITION HELD	Board Member, Board O	fficer, Treasurer			
3	POSITION HELD BY	FILER	X SPOUSE	DEPENDENT CHILD		
	ORGANIZATION	South Texas Health Syst	tem			
	POSITION HELD	Board Member				
	POSITION HELD BY	FILER	X SPOUSE	DEPENDENT CHILD		

EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION

PART 13

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Identify any person who provided you with necessary transportation, meals, or lodging, as permitted under section 36.07(b) of the Penal Code, in connection with a conference or similar event in which you rendered services, such as addressing an audience or participating in a seminar, that were more than perfunctory. Also provide the amount of the expenditures on transportation, meals, or lodging. You are not required to include items you have already reported as political contributions on a campaign finance report, or expenditures required to be reported by a lobbyist under the lobby law (chapter 305 of the Government Code). For more information, see FORM PFS--INSTRUCTION GUIDE.

1	PROVIDER	NAME AND ADDRESS
		NALEO Educational Fund
		1122 W Washington Blvd. Third Floor
		Los Angeles, CA 90015
2	AMOUNT	\$1,000.00

PERSONAL FINANCIAL STATEMENT

PARTS MARKED "NOT APPLICABLE" BY FILER

FORM PFS
COVER SHEET
PAGE 2

On this page, indicate any Parts of Form PFS that are not applicable to you. If you do not place a check in a box, then pages for that Part must be included in the report. If you place a check in a box, do NOT include pages for that Part in the report.

6	PAR	TS NOT APPLICABLE TO FILER
		N/A Part 1A - Sources of Occupational Income
	Χ	N/A Part 1B - Retainers
	Χ	N/A Part 2 - Stock
		N/A Part 3 - Bonds, Notes & Other Commercial Paper
		N/A Part 4 - Mutual Funds
		N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
		N/A Part 6 - Personal Notes and Lease Agreements
		N/A Part 7A - Interests in Real Property
		N/A Part 7B - Interests in Business Entities
	Χ	N/A Part 8 - Gifts
	Χ	N/A Part 9 - Trust Income
	X	N/A Part 10A - Blind Trusts
	X	N/A Part 10B - Trustee Statement
	Χ	N/A Part 11A - Business Associations
	X	N/A Part 11B - Assets of Business Associations
	Χ	N/A Part 11C - Liabilities of Business Associations
		N/A Part 12 - Boards and Executive Positions
		N/A Part 13 - Expenses Accepted Under Honorarium Exception
	Χ	N/A Part 14 - Interest in Business in Common with Lobbyist
	Χ	N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
	Χ	N/A Part 16 - Representation by Legislator Before State Agency
	X	N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
	Χ	N/A Part 18 - Legislative Continuances
	X	N/A Part 19 - Contracts with Governmental Entity
	Χ	N/A Part 20 - Bond Counsel Services Provided by a Legislator

e law requires the personal financial statement to be verified everification page on a personal statement filed electronical ividual required to file the personal financial statement. The verification page on a personal financial statement filed whe individual required to file the personal financial statement son authorized by law to administer oaths and affirmations								
ividual required to file the personal financial statement. e verification page on a personal financial statement filed w he individual required to file the personal financial statemer	ally with the Texas Ethics Commission must	la acceptata a la atracción atrac						
he individual required to file the personal financial statemer		nave the electronic sigi	e verification page on a personal statement filed electronically with the Texas Ethics Commission must have the electronic signature of the dividual required to file the personal financial statement.					
	nt as wells as the signature and stamp or se	Commission must have aal of office of a notary p	the signatur public or othe					
	I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2018, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.							
	The Honorable F	Ryan A. Guillen						
	Signature	e of Filer						
FFIX NOTARY STAMP / SEAL ABOVE								
worn to and subscribed before me, by the said	, thi	s the	day					
f, 20, to certify which, witr	ness my hand and seal of office.							
Signature of officer administering oath Printed na	ame of officer administering oath	Title of officer admini	stering oath					